

California COVID-19 Testing Task Force Update

April 22, 2020

Agenda



Introductions and logistics



Objectives



Approach



Progress



Next steps



Questions

Logistics

- **Participation by invitation only** – please send participation requests to testing.taskforce@state.ca.gov
- All of this is to facilitate a **trusted, open dialogue** in a highly fluid situation
- **A newsletter** will follow this meeting and can be used to share with/update others in your community

Introductions

Today's speakers

- **Dr. Charity Dean**, Assistant Director, California Department of Public Health
- **Paul Markovich**, President and CEO, Blue Shield of California
- **Dr. Christina Kong**, Vice Chair and Medical Director of Pathology & Clinical Lab, Stanford University

List of Task Force leaders provided on Task Force website at testing.covid19.ca.gov

Roles in this public-private partnership

- Appropriate state officials **always** make decisions
- Individuals from the private sector are providing important support at a critical juncture and **do not** make decisions

Two types of COVID-19 tests mentioned in these materials



PCR (molecular diagnostic)



Serological tests

Detection of...

Virus

Antigens or antibodies

Common sample type

Deep nasal or throat
swab

Blood/plasma

Key considerations

Gold standard for diagnostic
testing

Do not diagnose infection, but
can be useful for antibody
detection

Task Force goals and approach

Our goals

Increase total number of tests

24-hour turnaround

90% accuracy

Equitable and convenient access



Our approach



Access: Establish statewide collection sites for equitable access



Test processing: Maximize throughput and turnaround time of labs



Statewide distribution: Establish a smart distribution of scarce supplies



Facilitate innovation: Provide recommendations on new, promising tests



Data and analytics: Track and report results

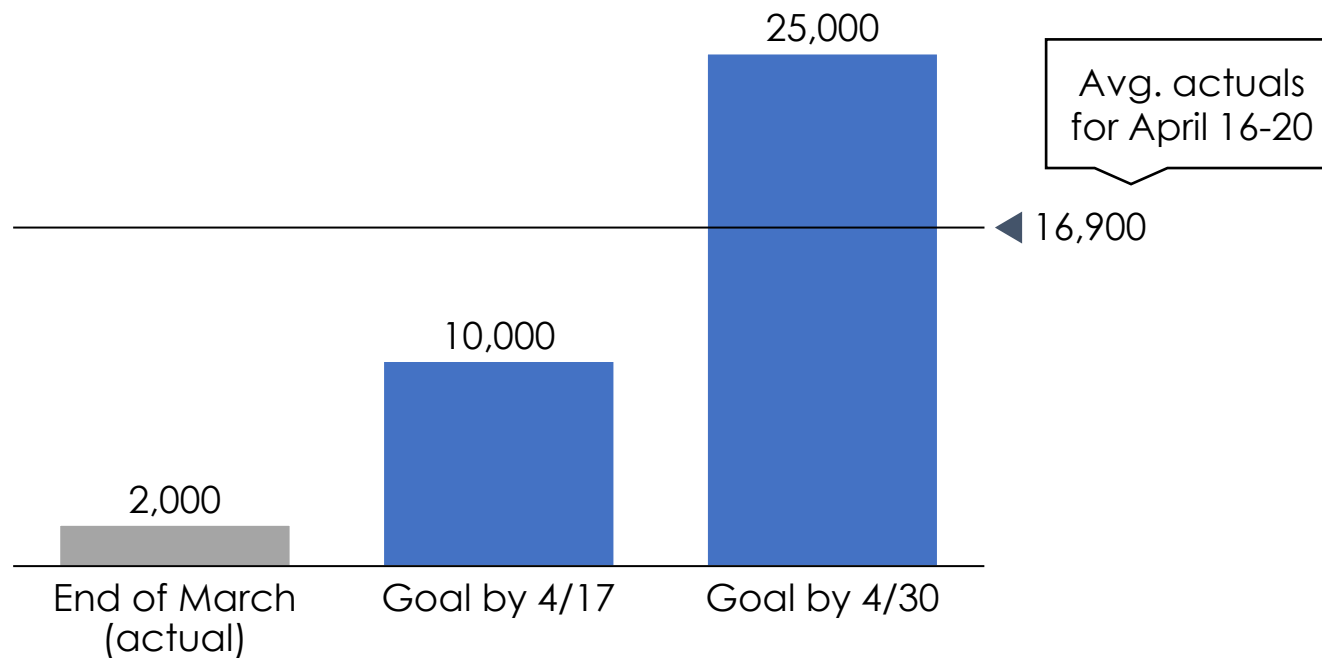


Community-driven workforce needs: Maximize using members of the community for the work

Reaching our goals will require taking a range of actions

Current and expected number of COVID-19 tests in California

Tests/day (PCR & Serology Tests)



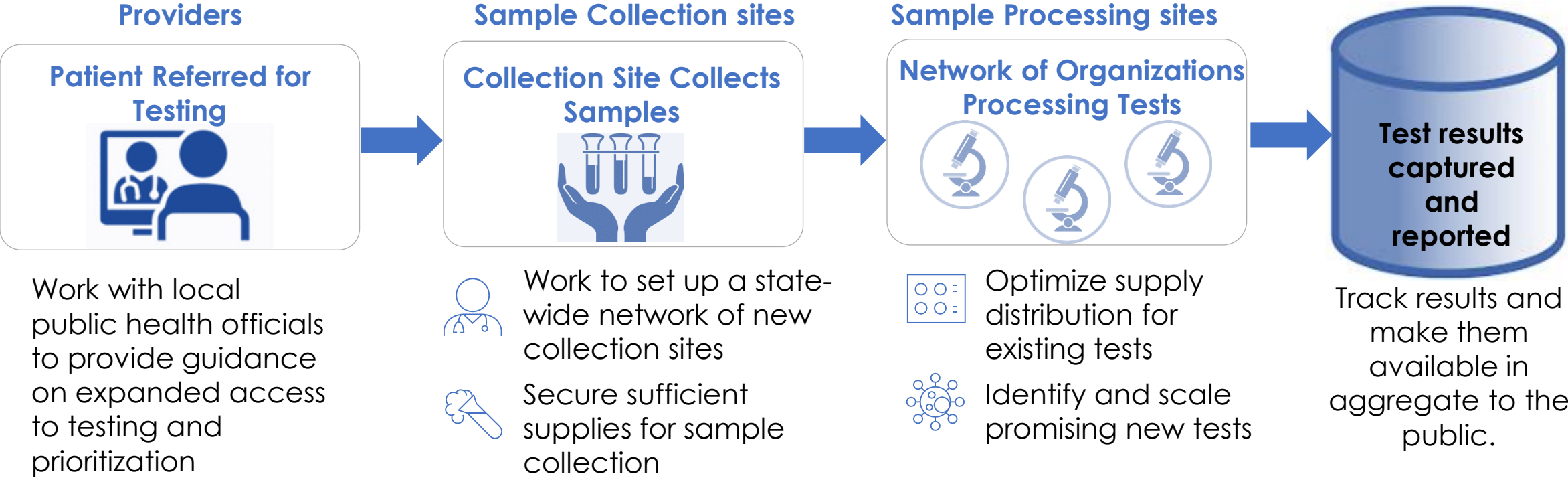
Actions to increase test volumes:



- Increase capacity for existing labs to process tests
- Increase number of specimens collected for processing
- Assess and deploy new tests (e.g., point of care, serology)

¹ Including serology tests; actual testing numbers will depend on need, goal is to have the capacity to do this number of tests

Task Force is optimizing end-to-end testing workflows



CA Task Force Team



The Task Force has identified ~270 existing collection sites across the state

Type of site for sample collection

Number of sites



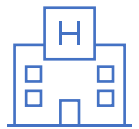
Drive through collection sites

30+



Clinics (including VA), physician offices, urgent care centers

40+



Hospitals (with or without own labs)

200+



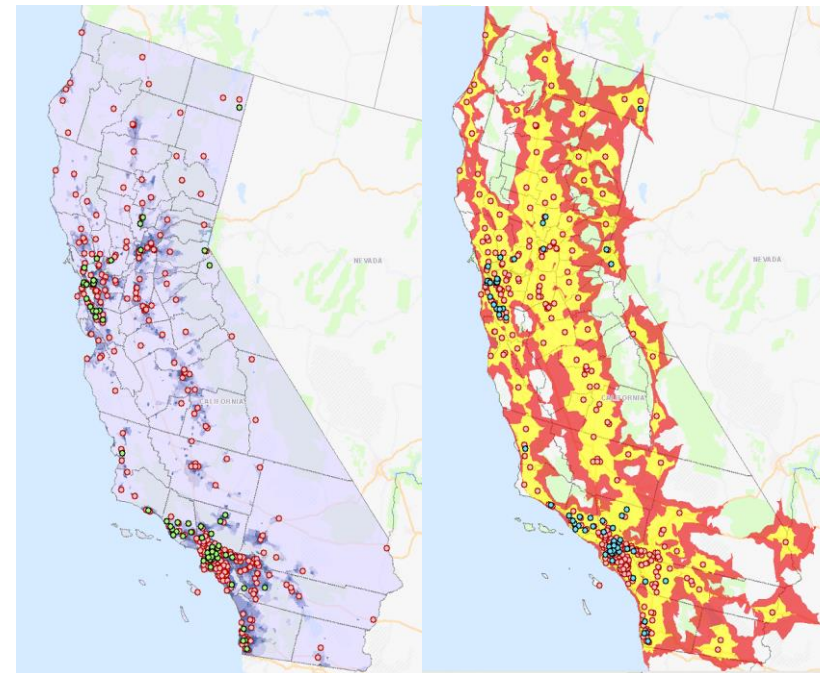
We are developing recommendations on where to establish additional sites for equitable access

Criteria for recommendation of additional sites:

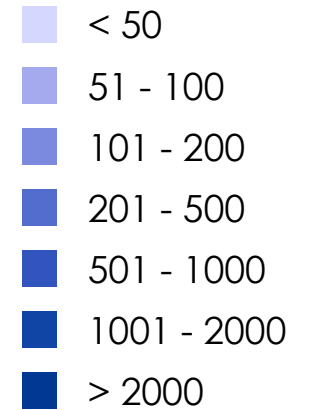


- Ensure a collection site within approx. **30 min** driving time in urban areas and within approx. **60 min** in rural areas
- Ensure there is sufficient capacity at each site to handle projected volume
- Minimize backlog, turnaround time by guiding sites where to send specimens

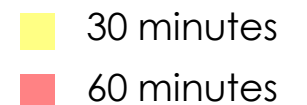
Existing COVID-19 collection sites in CA



Population density
People/sq. mile



Drive-time coverage





The Task Force is developing a playbook to stand up new collection sites

Goals for the playbook:

- Enable launch of new collection sites rapidly
- Maintain standard workflows, data sharing
- Meet community-driven needs

TABLE OF CONTENTS

- **Section One:** State-wide network of specimen collection sites
- **Section Two:** “Playbook” for establishing a specimen collection site
- **Section Three:** How to implement network

SAMPLE CONTENTS

Section Two: Playbook for Establishing a Specimen collection site

We have developed a playbook that provides guidance on the key elements associated with setting up and running a test site. They are provided below.

Staffing & Leadership

The following teams, roles, and leaders are recommended. Staffing needs are dependent on site location, capacity, number of lanes, etc.

- **Site Manager:** Responsible for the oversight of all specimen collection site and staff.
- **Staffing Coordinator:** Responsible for oversight of staff scheduling.
- **Triage Lead:** Responsible for overseeing the operation of the screening tool used for triage of potential patients to be tested. If triage is administered via a hotline, **call center staff** will also be needed.
- **Registration Lead & Team:** Responsible for conducting patient check-in, and directing patients to lanes, based on lane traffic.
- **Medical Lead & Staff:** Responsible for collecting, labeling, and storing samples. The medical staffing needs should be derived from the number of lanes at your site.
- **Logistics Staff:** Responsible for transporting samples to the contracted lab.
- **Lab Point of Contact:** An assigned point of contact who can answer results regarding test processing.
- **Communication Lead & Team:** Responsible for receiving testing results from the lab, and communicating the results to patients via phone or email.
- **Security Team:** Responsible for securing the specimen collection site.

Site

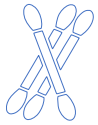
The following site elements are recommended. Site needs may be adjusted for site location, capacity, number of lanes, etc.]

- **Centrally located site:** Before selecting a site, the approximate demand and throughput of your site should be calculated. See the “Calculating Throughput” section of this playbook for more information. Ensure the site will allow lanes to be configured without accumulating traffic on public streets.
- **Tenting:** to protect specimen collection site staff and materials in inclement weather.
- **Refrigeration:** to properly store samples until lab transport.
- **Biohazard disposal service:** to pick up and dispose of soiled PPE.
- **Signage and Cones:** to provide visual cues to patients on how to proceed through the steps, limiting the need for verbal contact.



The Task Force is making progress to secure scarce collection supplies

Supplies needed for specimen collection and transportation



Swabs



Transport medium



Collection tubes



Biohazardous bags

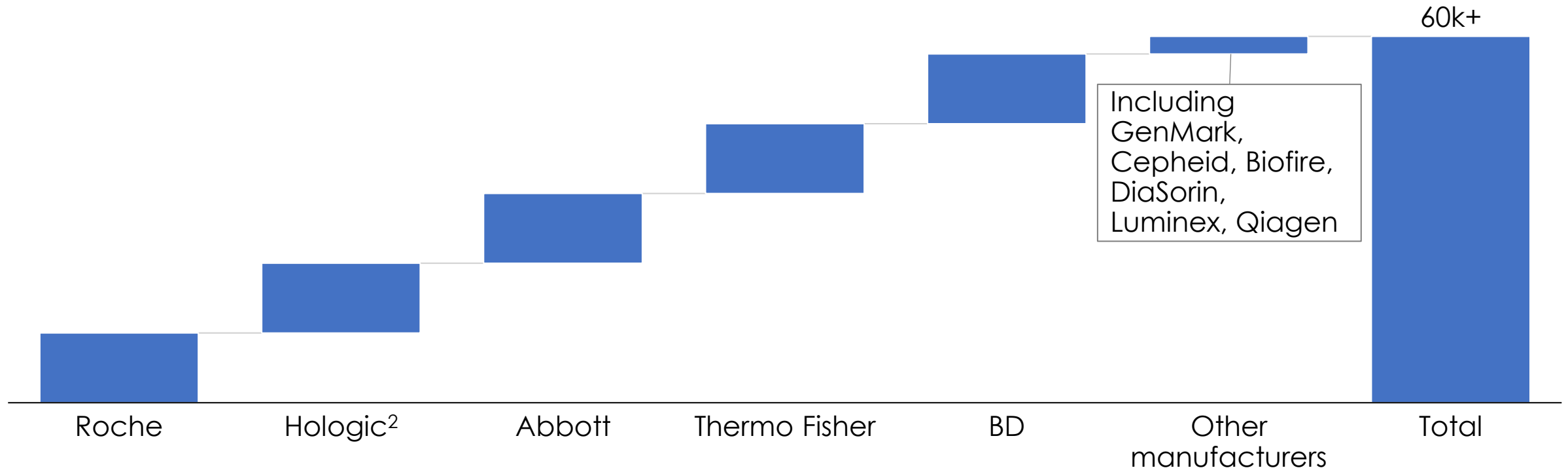


Personal protective equipment
(e.g., N95 masks, gowns, gloves)



California has sufficient lab capacity to meet the task force's daily testing goal

Capacity for PCR COVID-19 test processing in California¹



¹ Relative capacity takes into account availability of supplies for test processing and lab operating hours

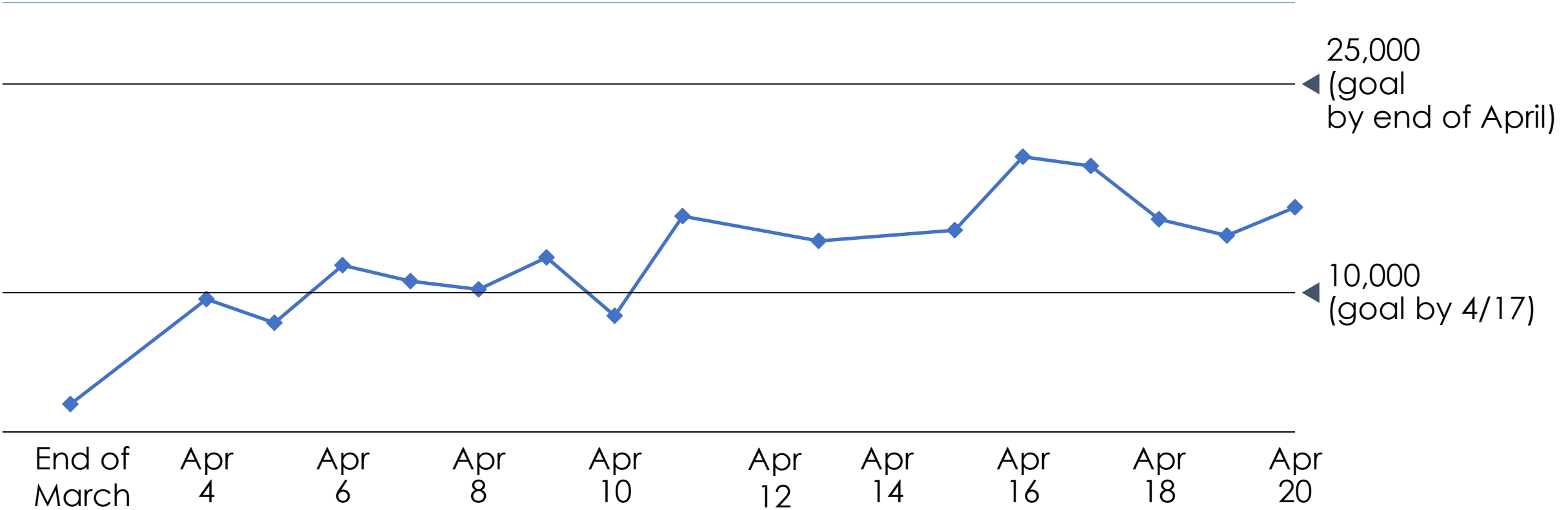
² Calculation based on lab reported install base, assume same throughput as Panther Fusion once test kit is approved

SOURCE: Install base aggregates data reported by labs; information is being refined through targeted outreach



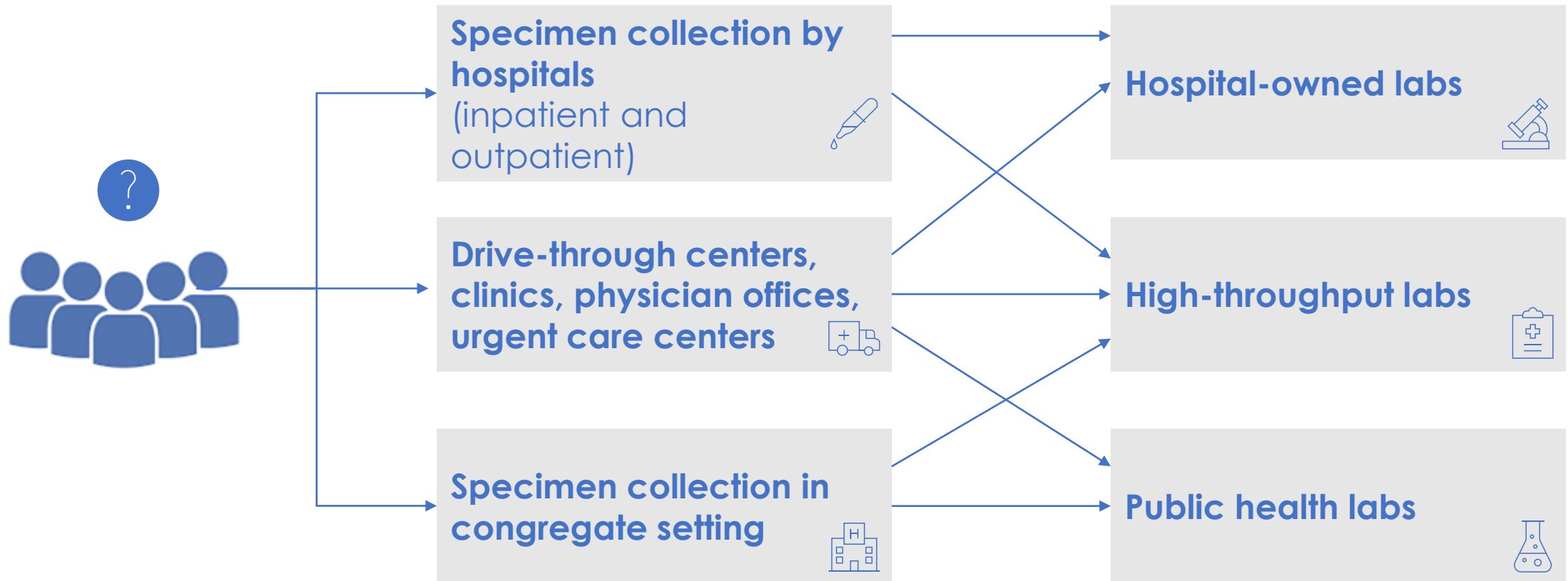
We are tracking tests/day daily

Total testing volume in California, tests/day





We will use this information to provide recommendations as to where collected specimens should be sent



Role of the Task Force

Guide people toward staffed and supplied collection sites

Match collection sites to labs that have capacity for faster test processing turnaround



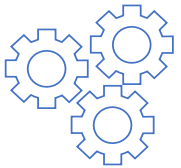
The Task Force is developing a dynamic model to inform where supplies should ideally be distributed

Maximum
capacity for
COVID-19 testing
in California

Testing volume
by lab

Supply inventory
in labs and
collection sites

Expected supply
shipments for
distribution



Model engine:

identification of bottlenecks and opportunities to increase throughput



Allocation decisions (made by appropriate state authorities)

Allocation based on criteria approved and prioritized by state decision-makers



Projected changes in testing volumes

We are also examining new tests and alternative methods

Assessment approach



Serology tests *(details follow)*

Technical assessment that includes a comprehensive set of performance metrics and follows a systematic multi-step approach



Rapid point of care tests

Focus on congregate settings, vulnerable populations, and first responders



Specimen pooling

Assessment focused on feasibility and identification of low prevalence areas where pooling may be beneficial

The Task Force has developed recommended minimum performance levels for serology tests

Assessment scheme

Step 1

Does the testing method have performance data derived from clinically and scientifically valid methods?

Step 2

Does the testing method have adequate clinical sensitivity (min 90%) and specificity (97%)?

Step 3

What is the relationship of sensitivity/specificity and predictive values for each test method?

Step 4

What are additional available performance metrics (e.g., turnaround time, specimen type, reagent stability and availability)?

What we hope you take away from this session

- We have developed a comprehensive but highly manual picture of testing in CA
- Picture is dynamic, changing every day
- Task Force is working hard to help:
 - Optimize distribution of testing supplies and equipment where needed
 - Recommend when new tests should be put into widespread use
 - Propose resources needed to expand testing capacity
 - Ensure equitable and appropriate statewide access to testing
- Efforts gaining traction as we have moved from ~2,000 tests per day when we started to averaging ~16,000 per day
- We have a path to goal of 25,000 tests per day and plenty of work left to do to achieve it

Next Steps

- Newsletter with updates about our work
- Please reach out to testing.taskforce@state.ca.gov if you have any questions about the Task Force efforts